

**FILED**  
MAR 19 2008  
RICHARD W. WIERING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

E-filing

**SBA**

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

Raymond Franks

Plaintiff,

vs.

D.K. Sisto, Warden,

Defendant.

**CV 08**

**1525**

CASE NO. \_\_\_\_\_

**PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS**

**(PR)**

I, Raymond Franks, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_ No ✓

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \_\_\_\_\_ Net: \_\_\_\_\_

Employer: \_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

- 9 a. Business, Profession or Yes \_\_\_\_ No ☒  
 10 self employment  
 11 b. Income from stocks, bonds, Yes \_\_\_\_ No ☒  
 12 or royalties?  
 13 c. Rent payments? Yes \_\_\_\_ No ☒  
 14 d. Pensions, annuities, or Yes \_\_\_\_ No ☒  
 15 life insurance payments?  
 16 e. Federal or State welfare payments, Yes \_\_\_\_ No ☒  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 \_\_\_\_\_  
 22 \_\_\_\_\_

23 3. Are you married? Yes \_\_\_\_ No ☒

24 Spouse's Full Name: \_\_\_\_\_

25 Spouse's Place of Employment: \_\_\_\_\_

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ \_\_\_\_\_ Net \$ \_\_\_\_\_

28 4. a. List amount you contribute to your spouse's support: \$ \_\_\_\_\_

- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

None

5. Do you own or are you buying a home? Yes ☐ No ☒

Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

6. Do you own an automobile? Yes ☐ No ☒

Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Is it financed? Yes ☐ No ☐ If so, Total due: \$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

7. Do you have a bank account? Yes ☐ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: \_\_\_\_\_

Present balance(s): \$ \_\_\_\_\_

\*17 Do you own any cash? Yes ☐ No ☐ Amount: \$ \_\_\_\_\_

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ☐ No ☒

8. What are your monthly expenses?

Rent: \$ 0 Utilities: 0

Food: \$ 0 Clothing: 0

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<u>0</u>	\$ <u>0</u>	\$ <u>0</u>
_____	\$ _____	\$ _____

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ 9. Do

1 you have any other debts? (List current obligations, indicating amounts and to whom they are  
2 payable. Do not include account numbers.)

3 None

4  
5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9 None

10  
11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15  
16 MARCH 13, 2008

17 DATE

Raymond Frank Z

18 SIGNATURE OF APPLICANT  
19  
20  
21  
22  
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24  
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26  
27  
28

Case Number: \_\_\_\_\_

**CERTIFICATE OF FUNDS**  
**IN**  
**PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Raymond Franks for the last six months at

California State Prison, Solano where (s)he is confined.  
[prisoner name]  
[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 53.10 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 53.10.

Dated: 2/25/08

Barbara Patten

[Authorized officer of the institution]

FEB 20 2008

STATE OF CALIFORNIA  
CDC - 193 (1/88)

DEPARTMENT OF CORRECTIONS

## TRUST ACCOUNT WITHDRAWAL ORDER

To: Warden

Approved 

Date \_\_\_\_\_ 19\_\_\_\_


I hereby request that my Trust Account be charged \$ 3.00 for the purpose stated below and authorize the withdrawal of that sum from my account:

V 08354

NUMBER

State below the PURPOSE for which withdrawal is requested  
(do not use this form for Canteen or Hobby purchases).

PURPOSE

CERTIFY MY ACCT.  
NAME (Signature please, DO NOT PRINT)

PRINT PLAINLY BELOW name and address of person  
to whom check is to be mailed.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

02-22-08P12:25 RCVD

RAYMOND FRANKS

PRINT YOUR FULL NAME HERE

